**EORM D** 

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C 20549

#### FORM D



NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

Civio	Approvar
OMB Number: expires: Nove estimated avera	
	vember 30, 2001
Estimated ave	rage burden
	onse 16.00

1243037

SEC US	E ONLY
Prefix	Serial
DATE RE	CEIVED
ŀ	l

Name of Offering ( check if this is an amendment and name has changed, and indicate change.) Whitfield West JV	
Filing Under (Check box(es) that apply): □ Rule 504 □ Rule 505 ☒ Rule 506 □ Section	4(6) DY ULOE
Type of Filing:   New Filing  Amendment	RECEIVED
A. BASIC IDENTIFICATION DATA	/7
1. Enter the information requested about the issuer	// OCT 1 4 ZUU4 >>
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Ampak Oil Company	
Address of Executive Offices (Number and Street, City, State, Zip Code) 801 E. Plano Parkway, Ste. 230, Plano, TX 75074	Telephone Number (Including Area Code) 972-422-4144
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Oil & Gas Exploration	PROCESSE
Type of Business Organization	
☐ business trust ☐ limited partnership, already formed ☐ c	other (please specify): QCT 1 5 2004
Actual or Estimated Date of Incorporation or Organization:  Month Year  0 2 8 8  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for	State; Estimation ANCIAL
CN for Canada; FN for other foreign jurisdiction)	

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice consittues a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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#### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers;
     and

<b>2.10</b>									
Each general and man	nagin	g partner of p	artn	ership issuers.					
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director	X⊠General and/or Managing Partner
Full Name (Last name first, i Ampak Oil Company	f indi	vidual)							
Business or Residence Addre 801 E. Plano Pkwy, Ste. 23				City, State, Zip Cod	le)				
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer	呇	Director	☐General and/or Managing Partner
Full Name (Last name first, i Khan, M. Gulnawaz	f indi	vidual)							
Business or Residence Addre 801 E. Plano Pkwy, Ste. 230				City, State, Zip Cod	e)				
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director	☐General and/or Managing Partner
Full Name (Last name first, i	f indi	vidual)							
Business or Residence Addre	ss (N	umber and S	reet,	City, State, Zip Cod	e)			· · · · · · · · · · · · · · · · · · ·	
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director	☐General and/or Managing Partner
Full Name (Last name first, i	f indi	vidual)							
Business or Residence Addre	ss (N	umber and S	reet,	City, State, Zip Cod	c)		<del></del>		
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director	☐General and/or Managing Partner
Full Name (Last name first, i	f indi	vidual)							
Business or Residence Addre	ss (N	umber and S	treet,	City, State, Zip Cod	ic)	tana ang mga mga mga mga mga mga mga mga mga mg		· · · · · · · · · · · · · · · · · · ·	
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director	General and/or Managing Partner
Full Name (Last name first, i	f indi	vidual)							
Business or Residence Addre	ss (N	umber and S	treet,	City, State, Zip Cod	ie)				
Check Box(es) that Apply:	D	Promoter		Beneficial Owner		Executive Officer		Director	☐General and/or Managing Partner
Full Name (Last name first, i	f indi	vidual)							
Business or Residence Addre	ss (N	umber and S	lreel,	City, State, Zip Cod	le)				

				1	3. IN	FOR	MAT	ION .	ABO	UT O	FFERI	1 <b>G</b>		
													Yes	No
1. Has the	issuer so	ld or do	es the i											Ø
				Ап	swer a	lso in A	ppend	ix, Col	umn 2,	if filin	g under UL	OE.		
2. What is	the mini	num in	vestme	nt that	will be	accept	ed fron	n <mark>any</mark> ir	ndividu	al?			\$ <u>5,450</u>	0.00
	<b>~</b> ·												Yes KO	No □
3. Does the	offering	g permi	t joint c	wnersi	up of a	single	unit?						E.J	
commis offering and/or	ssion or : g. If a pe with a st	similar rson to ate or si	remund be liste tates, li	eration ed is an est the r	for soli associ ame of	icitatio ated po f the br	n of pu crson o oker o	irchase r agent r dealei	rs in co of a bi . If mo	nnection roker of re than	on with sale r dealer reg r five (5) pe	ctly or indirectly, any es of securities in the distered with the SEC ersons to be listed are ker or dealer only.		
Full Name	(Last na	me first	, if indi	ividual)	)									
Business of	Residen	ce Add	ress (N	umber	and Str	eet, Cit	y, State	e, Zip (	Code)					
Name of A	ssociated	Broker	or Dea	ler										
States in W	hich Per	rson Lis	sted Ha	s Solic	ited or	Intends	to Sol	licit Pu	rchaser	'S				
[AL] [AF												.,,,,,,		
[IL] [IN	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]			
[MT] [NE	(VM] [	[NH]	[NJ]	[NM]	{NY}	[NC]	[ND]	[OH]	(OK)	[OR]	[PA]			
[RI] [SC	(SD)	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			
Full Name	(Last nai	me first	, if indi	vidual)	)			_						. •
Business o	Residen	ice Add	ress (N	umber	and Str	eet, Cit	y, Stat	e, Zip (	Code)					
Name of A	ssociated	Broker	or Dea	ler	<del> </del>									·
States in W														· · · · · · · · · · · · · · · · · · ·
(Check "A [AL] [AF														
[IL] [IN [MT] [NE		•				-								
[RI] [SC														
Full Name														
Business of	r Resider	ice Add	ress (N	umber	and Str	eet, Cit	y, Stat	c, Zip (	Code)		- · · · · · · · · · · · · · · · · · · ·			
Name of A	ssociated	Broker	or Dea	ler					<del></del> -	- <del>-</del>			· .	<del></del>
States in V														
[AL] (AF														
(IL) (II														
[MT] [NE		-	-											
[RI] [SC	'l [on]	[IN]	[TV]	[UI]	[AT]	[ AV ]	[MM]	[ AA A ]	[ 14 T ]	[14T]	(EV)			

(Use blank sheet, or copy and use additional coopies of this sheet, as necessary) 3 of 8

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offer-			
ing, check this box \( \Pi \) and indicate in the column below the amounts of the securities of-			
fered for exchange and already exchanged.			
Type of Security	Aggreg Offering		Amount Already Sold
Debt	\$		\$
Equity	\$		\$
□ Common □ Preferred			
Convertible Securities (including warrants)	\$		\$
Partnership Interests	\$ <u>784,800</u>	0.00	\$0.00
Other (Specify)	\$		\$
Total	\$		\$
Answer also in Appendix, Column 3, if filing under ULOE			
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
	Numb Investo		Aggregate Dollar Amount of Purchases
Accredited Investors			\$
Non-accredited Investors			\$
Total (for filings under Rule 504 only)			\$
Answer also in Appendix, Column 4, if filing under ULOE			
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.			
Type of offering	Type o Securi	ty	Dollar Amount Sold
Rule 505			\$
Regulation A			\$
Rule 504			\$
Total			\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
Transfer Agent's Fees			\$
Printing and Engraving Costs		X	\$ <u>10,000.00</u>
Legal Fees			\$
Accounting Fees		Σk	\$ 5,000.00
Engineering Fees			\$
Sales Commissions (Specify finder's fees separately)			\$
Other Expenses (identify) Blue Sky Filing Expenses & Fees		<u> </u>	\$ 24,300.00
Total		— ⊡k	\$ 39,300.00

C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES	AND USE OF	PROCEEDS					
Question 1 and total expenses furnished in	b. Enter the difference between the aggregate offering price given in response to Part C-Question 1 and total expenses furnished in response to Part C-Question 4.a. This difference is the "adjusted gross proceeds to the issuer."							
used for each of the purposes shown. If the an estimate and check the box to the left must equal the adjusted gross proceeds to	pross proceeds to the issuer used or proposed to be the amount for any purpose is not known, furnish of the estimate. The total of the payments listed the issuer set forth in response to Part C-Ques-							
tion 4.b. above.		Payments to Officers,						
		Directors, & Affiliates	Payments To Others					
Salaries and fees		\$□	\$					
Purchase of real estate		\$□	\$					
Purchase, rental or leasing and instal	llation of machinery and equipment	\$□	\$					
Construction or leasing of plant bui	ildings and facilities	\$□	\$					
offering that may be used in exchang	uding the value of securities involved in this e for the assets or securities of another issuer	\$□	\$					
Repayment of indebtedness		\$□	\$					
Working capital		\$□	\$					
Other (specify) Turnkey Drilling Co	osts( including completion)	\$ <b>X</b> X	\$ <u>745.500.00</u>					
		s □	\$					
			\$ 745,500.00					
	als added)	· · · · · · · · · · · · · · · · · · ·	15,500.00					
	D. FEDERAL SIGNATURE							
following signature constitutes an undertakin	gned by the undersigned duly authorized person. g by the issuer to furnish to the U.S. Securities a by the issuer to any non-accredited investor pursua	nd Exchange Comm	ission, upon written					
Issuer (Print or Type)	Signature	Date / 2 -	2.004					
Ampak Oil Company	M. C. evangskan	18-72-						
Name of Signer (Print or Type)	Title of Signer (Print or Type)							
M. G. Khan	President							

**ATTENTION** 

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

undersigned duly authorized person.			,
issuer to offerees.  4. The undersigned issuer represents the Limited Offering Exemption (UL availability of this exemption has the	nat the issuer is familiar with the conditions that must be satisfied to be entitle in the issuer of the state in which this notice is filed and understands that the issue burden of establishing that these conditions have been satisfied.  If knows the contents to be true and has duly caused this notice to be signed on its satisfied.	d to the U ter claim	Iniform ing the
Form D (17 CFR 239.500) at such (	· · · · · · · · · · · · · · · · · · ·	·	
	e Appendix, Column 5, for state response.  ertakes to furnish to any state administrator of any state in which this notice is	filed and	ntice on
	Amandia Column 5 Santa arranga	Yes	<b>⊠</b> K

E. STATE SIGNATURE

Instruction:
Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

### APPENDIX

1		2	3			4		9	,
	non-ac invest St	to sell to credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (PartC-Item 1)	3	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	Partnership Interests	Number of Accredited Investors	}	Number of Nonaccredited Investors	Amount	Yes	No
AL		Х	\$784,800.00	Ö	0.00	0	0.00		X
AK		Х	\$784,800.00	0	0.00	0	0.00		Х
AZ		х	\$784,800.00	0	0.00	0	0.00		Х
AR		Х	\$784,800.00	0	0.00	0	0.00		Х
CA		х	\$784,800.00	0	0.00	0	0.00		Х
CO		x	\$784,800.00	0	0.00	0	0.00		Х
CT		Х	\$784,800.00	0	0.00	0	0.00		Х
DE		X	\$784,800.00	0	0.00	0	0.00		Х
DC		Х	\$784,800.00	0	0.00	0	0.00		Х
FL		X	\$784,800.00	0	0.00	0	0.00		Х
GA		Х	\$784,800.00	0	0.00	0	0.00		Х
HI		X	\$784,800.00	0	0.00	0	0.00		Х
ID		x	\$784,800.00	0	0.00	0	0.00		Х
IL		X	\$784,800.00	0	0.00	0	0.00		. x
IN		х	\$784,800.00	0	0.00	0	0.00		X
IA		Х	\$784,800.00	0	0.00	0	0.00		X
KS		Х	\$784,800.00	0 _	0.00	0	0.00		X
KY		Х	\$784,800.00	0	0.00	0	0.00		X
LA		X	\$784,800.00	_ 0	0.00	0	0.00		X
ME		Х	\$784,800.00	0	0.00	0	0.00		Х
MD		Х	\$784,800.00	0	0.00	0	0.00	<del></del>	X
MA		Х	\$784,800.00	0	0.00	0	0.00		х
MI		X	\$784,800.00	0	0.00	0	0.00		X
MN		Х	\$784,800.00	0	0.00	0	0.00		Х
MS		Х	\$784,800.00	0	0.00	0	0.00		<u>x</u>
MO		Х	\$784,800.00	0	0.00	0	0.00		Х

## APPENDIX

1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (PartC-Item 1)	4 5 Disqualificat							
				·	under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)						
State	Yes	No	Partnership Interests	Number of Accredited Investors	1	Number of Nonaccredited Investors	Amount	Yes	No		
MT		X	\$784,800.00	0	0.00	0	0.00		x		
NE		х	\$784,800.00	0	0.00	0	0.00		х		
NV		Х	\$784,800.00	0	0.00	0	0.00		x		
NH		X	\$784,800.00	0	0.00	0	0.00		х		
NJ		X	\$784,800.00	0	0.00	0	0.00		x		
NM		х	\$784,800.00	0	0.00	0	0.00		x		
NY		x	\$784,800.00	0	0.00	0	0.00		x		
NC		х	\$784,800.00	0	0.00	0	0.00		x		
ND											
ОН		X	\$784,800.00	0	0.00	0	0.00		x		
OK		_ x	\$784,800.00	0	0.00	0	0.00		x		
OR		Х	\$784,800.00	0	0.00	0	0.00				
PA		<u>X</u> _	\$784,800.00	0	0.00	0	0.00		х		
RI		X	\$784,800.00	0	0.00	0	0.00		X		
SC		X	\$784,800.00	0	0.00	0	0.00		x		
SD											
TN		Х.	\$784,800.00	0	0.00	0	0.00		x		
TX		x	\$784,800.00	0	0.00	0	0.00		x		
UT											
VT		Х	\$784,800.00	0	0.00	0	0.00		x		
VA		Х	\$784,800.00	0	0.00	0	0.00		x		
WA		Х	\$784,800.00	0	0.00	0	0.00	·	×		
wv		Х	\$784,800.00	. 0	0.00	0	0.00		x		
WI		х	\$784,800.00	0	0.00	0	0.00		x		
WY		_ X .	\$784,800.00	0	0.00	0	0.00		×		
PR											